Faxed 1117/14 (2) 12/8 HKS-ML.

## **CLETS MISUSE INVESTIGATION REPORTING FORM**

**Department of Justice CLETS Administration Section** P.O. Box 903387 Sacramento, CA 94203-3870

Telephone: (916) 227-3677 FAX: (916) 227-0696

Calendar Year 2018

		(Submit this form by February 1 of each year for the previous calendar year. Include the number of investigations performed related to CLETS misuse, including any disciplinary action taken.)
Marine Carps Police Department-Barstow		
379 James L. Day MCLB Barstow, CA 92311 Address		
Melinda Larssen Person Completing Form		
a	(00)	San Bernardin O County
1.	. Total number of investigations performed related to CLETS misuse:	
	a.	Pending + b. Closed = Total Performed
2.	Of	the total number of investigations performed, how many originated from:
	a. b. c.	Private citizen complaints  tntemal within your Department  From another agency
3.	Mis	suse violations found from investigations (see #4 below): Total Found (4a+4b+4c+4d)
4.		al numbers of each type of action taken on misuse violations (note only the highest level of action taken in each case):
	а.	No action taken:
	b.	Administrative Action: Counsel Reprimand Suspension
		Resignation Termination Other O
	C.	Criminal Complaints Filed:  Infraction Misdemeanor Felony
	d.	Number of convictions from criminat complaints filed:  Infraction Misdemeanor Felony Unknown